CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE	MONETARY RECEIPTS
(Rev. 06/97) CHE	CK THIS BOX IF
7-19	-03

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (II applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (II applicable)	AMOUNT RECEIVED	√ IF FOR FUND- FLAISER INCOME
5/20/03	ID#	Laurie Sciken 1232 Westside Dr Council Bluffs IA 51501		\$ 15.22	/
5/20/03	ID# CK#	Erin Erickson 16053 Callifornia St Omaha NE 68118		2700	/
5/20/03	ID#	Alicia Kucinski 210 E 9th St Pella IA 50219		65.34	/
5/20/03	CK#	Laura Abbas 1440 Kent Ale Karawka IA 50447		61.84	J
5/20/03	CK#	Michelle Doughty. 99 Open Dr Council Bhiffs IA 51503		3600	J
5/20/03	ID# CK#	Carolyn Brumfuild 200 Essex Land Davenport IA 52803		3400	J
5/20/03	ID# CK#	Deb Schuler 11638 W. Cross Rd Galera II 61036		218.64	J
5/20/03	ID#	Kothryn Kollman-Streinn 2888 Mimber Linest Dubugue IA 52001		8.50	J
5/20/03	CK#	Lisa Wardward 1245 Valentine D1 Dubuque JA 52003		21 00	J
56.1	1D#	Rutti Simon 1008 Thave Cascade JA 52033		2051.16	j ,
			SUB-TOTAL	100 70	7

TOTAL (if last page of this schedule)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter 'not applicable' in the relationship column.

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

RDH PAC #6477

SCHEDULE A (Rev 06/97)	MONETARY REGEIPTS
CHE	CK THIS BOX IF VDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAG (POLITICAL ACTION COMMITTEE), LIST THE PAG IDENTIFICATION NUMBER AND THE PAG CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF 10 NUMBERS IS AVAILABLE FROM THE IOWA EYHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
	ID#	Sarah Turner		s	,
5/20/03	CK#	629. Songe Dr 12 100 JA 50702		\$ 53.27	<i>J</i>
	ID#	Fatricia Steffensmein			,
5/20/03	CK#	6420 NW 97h St Johnston, IA 50131		17.50	✓
	ID#	·			,
5/20/03	CK#	Ann Leppert 10472 Lake Electron Dr. Dubugue JA 52003		28.62	
	ID#	Anneste Byman			1
5/20/03	CK#	Concerc NE LES 118		10:20	J
	ID#	Dawn Grandia.			,
5/20/03	CK#	174 Corrine Ale Council Bluffs IA 51503		240.43	<i>√</i>
61	ID#	Terri Estell			ſ
5/20/03	CK#	103 Wenwood Cu Council Bluffs IA 51503		13.36	
- 1	ID#	Annette Byman			/
5/20/03	CK#	628 N 15th Cir Omaha NE 68118		18.17	J
	ID#	Nancy Adriance		15° 25	
5/20/03	CK#	32-10' SN 339 51 Des Mones IA 50321			
_	ID#	Peth Pelton		35-00	
6/20/03	CK#	4000 mehalley lane NE Solon IA 50058			
j	ID#	Jill Ludvicek		25 80	
5/20/03	CKH	Ionua City IA 50046		23	
			SUB-TOTAL	GN. 800	

TOTAL (if last page of this schedule)

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Page 2 of 3

FROM:

For instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTE	EE NAME (Must be same as on S	latement of Organization)	
RDH	PAC	* 6477		

SCHEDULE A (Rev. 06/97)	MONETARY REGEIPTS
CHE	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (If applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
	ID#	Nancy Le Perus		e . — &O	
5/20/03	CK#	Nouncy Le Peaul 114 S. Mount Vernon Dr Jowa City IA 52245		\$1500	
	ID#	Mary Hartman		~ ~	
5/20/03	CK#	Octuber IA Source		SS SS	
	ID#	Pampered Chef.			
5/20/03	CK#	Pampued Chef.		128.01	V
	ID#	America Princes			
5/20/03	CK#	Annette Byman 628 N 157th Cir Omaha NE 68118		138.58	~
	ID#				
	CK#				:
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	iD#				
	CK#				
	ID#				
	CK#				,
		9	SUB-TOTAL	/	
			1	s 30/2.89	1

TOTAL (If last page of this schedule)

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter 'not applicable' in the relationship column.

Page 3 of 3

FAX NO. : 7123298471

FROM:

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES. LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF
AME	NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

RDH PAC ** 16477

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/13/03		Annette Byman 625 157 Cia Omalaci NE 68115	Purchase of fund ration product	\$ 1126,27
	ID#			
	ID#			
	CK#			
	ID#			·
	CK#			
	CK#			
	ID#			
	CK#			
	ID#			
	СК#			
	ID#			
	CK#		SUB-TOTAL	\$
			TOTAL (If last page of this schedule)	\$1126.27

r	HIS BOY	APPLIES	TO CANDIDATES'	COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	. 1	. of	
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FOR INSTRUCTIONS, SEE BACK OF FORM	JUL 19 2	ານາ [FORM	
	30F E I 2	003	DR-2	DISCLOSURE
DISCLOSURE SUMMARY PAGE	der	[_	(Rev. 01/98)	REPORT
	v	<u> </u>	or Office Use O	nív
COMMITTEE NAME (Must be same as on Statement of Organization)		Comm. # (ezi72
RDH PAC = 10477	-			
IMPORTANT: Indicate type of committee you are reporting for:		i		
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) Coul (5) County PAC (8) Ballot Issue/Franchise Committee (7) County/City Central C (8) Support State of Candidates	nty/Local Candidate ommittee			
	515 2267	<u></u>	7	117/03
SIGNATURE OF TREASURER (or person filing this report)	TELEPHONE		DATE S	
		4 - 40	0.4. 4000	
Routine Penalties Due For Late Filed	неропз напде	from \$2	0 to 2800	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLL	OWING SENTEN	<u> </u>		
•			AMON ELECT	ION VEAR
report date)	TI FOR ANIA (I) EL	ndicate on	2)NON-ELECT	ION TEAM.
(report date)	'	ndicate of		
CHECK IF AMENDMENT TO REPORT DATED		Local Con	nmittees, enter Da	ate of Election
		Cough	l scal Committon	s, enter County in
Check if this is final (termination) report and attach Notice of Dissolution (You must continue to file reports until a Notice of Dissolution			ction is held	s, enter county in
(1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	•			
STATEMENT OF CASH ON HAND at the beginning of the reporting period. (This is the total monies held by the committee. This amount MUST be to	otal			
same as the cash on hand at the end of the last reporting perior must be zero if this is first report filed.)	4	\$	153 · °	x3
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedule A)		.,	1510	. 44
Schedule F. Loans Received total (Attach Schedule F)	*******************			
Schedule H: Total Sales of Campaign Property (Attach Sched	ule H)		<u> </u>	
(Schedule H applies to Candidates' Committees O	nly)			
	SUB-TOT	ALS	1663	5,73
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule 8: Expenditures total (Attach Schedule B)			1126.	<u>الح</u>
Schedule F: Loan Repayments total (Attach Schedule F)			<u>Ø</u>	
CASH ON HAND at the end of this reporting period (if final report, balan be zero) (Attach DR-3)		\$_	537.	45
UNPAID BILLS (From Schedule O - Attach Schedule O)				
IN KIND CONTRIBUTIONS (From Schedule E - Altach Schedule E)			<u>Z</u>	
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)				
CANDIDATE COMMITTEES ONLY:				_
CONSULTANT BREAKDOWN (Schedule G Attached?)	1-10	_	YES	NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedu	ле п)	5.		

FAX NO. : 7123298471

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE	NAME (M	usi be same as	on Statement of Organization)	
RDH	PAC	世しいつつ		

SCHEDULE A (Rev. 06/97)	MONETARY REGEIPTS
	CK THIS BOX IF VOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF 10 NUMBERS IS AVAILABLE FROM THE 10WA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (II applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
	ID#	Laurie Selken 1832 Westside Dr		\$ 15.22	1
	ID#	Council Bluffs IA 51501	 	13.00	ļ
	CK#	Erin Erickson 16053 California St Omaha NE 68118		2700	/
	1D#	Alice Kucinski			,
	CK#	210 E 9th St Pella, IA 50019		65.34	√
	ID#	Laura Abbas			,
	CK#	1440 Kent Ale Kanawka IA 50447		61.84	J
	iD#	Michelle Doughty.		3600	1
	CK#	Council Bluffs IA S1503		36	J
	ID#	Carolyn Brumfild			,
	CK#	Davenport IA 52803		3400	J
	ID#	Deb Schuler			1
	CK#	11638 W. Cross Rd Genlera II 61036		218.64	V
	ID#	Kethrum Kollman-Streinn			,
	CK#	2888 otimber Line St Dubugue JA 52001		8.50	
	ID#	Lisa Woodward	_		,
	CK#	1245 Valentine Dr Dubuque JA 52003		2100	1
	ID#	Reth Simon			/
	CK#	1008 7th the Cascade JA 52033		2051.16	, l
			SUB-TOTAL	s 694.70	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this

schedule)

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

	COMMITTE	E NAME (A	<mark>fust be same as on Statement of Organi</mark> zation	n)
1	RDH	PAC	# 6477	

SCHEDULE A (Aev. 06/97)	MONETARY REGEIPTS
	CK THIS BOX IF

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA EYHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
	CK#	Souch Tuner 629. Songa Dr		\$ 53.27	1
	<u></u>	Wester 100, IA 50702			
	ID#	Fethicia Staffensmeur		17.50	/
		Johnston, IA 50131			<u> </u>
	ID#	Ann Leppert			/
	CK#	Dubuque, TA 52003		28.69	
	iD#	Anneste Byman			1
	CK#	Comata NE LOSIS		10:50	<i>J</i>
	ID#	Deusn Granchia			
	CK#	174 Corrine Are Council Bluffs In 51503		240.43	<i>J</i>
	ID#				
	CK#	Terri Estell 103 Wenwood Cir Council Bluffs IA 51503		13.36	J
	ID#	Annette Byman			;
	CK#	Gos N 15th Cir Omaha NE 68118		1817	J
	ID#	Nancy Adriance		75 80	
	CK#	82-10 SIN 33-15-1 Des Molnes IA 50321		,	
	ID#	Reth Petton		35-00	
	CK#	4000 Mehaffey Lane NE Solon IA 5005E		1550	
	1D#	Jill Ludvicek		25 80	
	OKH	IOWA CUTY TA 50046		32	
			SUB-TOTAL	5N. 85	

TOTAL (if last page of this schedule)

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CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME	(Must be same as on Statement of Organization)	
RDH PAC	* 10477	

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	ECK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIV (MM/DD/	'ED (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (If applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER INCOME
	ID#	Nancy Le Penus		03-0	
	CK#	Nancy Le Peaul 114 S. Mount Vernon Dr Jowa City IA 50245		\$1500	
	ID#	Mary Hartman		10 M	
	CK#	Oction IA Source		్రావ్ య	
	1D#	Pampered Chaf.			
	CK#	Pampered Chaf.		128.01	~
	ID#				
	CK#	Annette Byrnan 1628 N 157th Cir. Omaha NE (08118		138.88	V
	ID#				
	CK#				
	ID#				
	CK#			!	
	ID#				
	CK#			j	
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	· 2N 80	

TOTAL (If last page of this schedule)

10) 5/5/0.44

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FROM:

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
2.7	DA PAC +	16477		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	Annette Byman	Pusha a sá	
	CK# 1097	Annette Byman 628 1577 Ch Omalosi NE 68115	Purchase of funditable product	\$ 1126.27
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$
			TOTAL (If last page of this schedule)	\$1126.27

THIS BOY	APPLIES TO	CANDIDATES'	COMMITTEES OF	ILY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf or the candidate's committee. (Refer to Schedule Ginstructions and Iowa Code 56.6(3)(i):)

Page	<u>)</u> st	
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